Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Margaret First name T.	-	First name
	license or passport).	Middle name	-	Middle name
	Bring your picture identification to your meeting with the trustee.	Watson Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3048		

Del	btor 1 Margaret T. Watso	on	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		129 Westwood Drive Brentwood, NY 11717			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Suffolk			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Margaret T. Watson				Case number (if known)					
Par	t 2: Tell the Court About Y	our Bank	ruptcy C	ase					
7. The chapter of the Bankruptcy Code you are choosing to file under		Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		☐ Chap	ter 11						
		☐ Chap	ter 12						
		■ Chap	ter 13						
8.	How you will pay the fee	abo	out how you	ou may pay. Typica	ally, if you are paying the fee yo	k with the clerk's office in your local court ourself, you may pay with cash, cashier's c alf, your attorney may pay with a credit ca	check, or money		
		☐ In	eed to pa	y the fee in install	Iments. If you choose this option	on, sign and attach the Application for Indi	viduals to Pay		
			Ū	,	Official Form 103A).	a only if you are filing for Chapter 7. By lov	v o judgo mov		
		but app	t is not red plies to yo	quired to, waive you our family size and y	ur fee, and may do so only if yo you are unable to pay the fee in	n only if you are filing for Chapter 7. By law ur income is less than 150% of the official n installments). If you choose this option, y cial Form 103B) and file it with your petition	poverty line that out		
9.	Have you filed for	■ No.							
	bankruptcy within the last 8 years?	☐ Yes.							
	·		District		When	Case number			
			District		 When	Case number			
			District		When	Case number			
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	■ No.	Go to	line 12.					
	residence?	☐ Yes.	Has y	our landlord obtain	ed an eviction judgment agains	t you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initia</i> this bankruptcy p		Judgment Against You (Form 101A) and fi	le it as part of		

Deb	otor 1 Margaret T. Watso	n		Case number (if known)
Par	Report About Any Bu	sinesses	You Own as a Sole Propri	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	-			Number, Street, City, State & Zip Code

Debtor 1 Margaret T. Watson Case number (if known)

Part 5: Explain Your Efforts

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Margaret T. Watso	on		Case numb	Case number (if known)			
Par	t 6: Answer These Quest	ions for Re	eporting Purposes					
	What kind of debts do you have?	16a.		nsumer debts? Consumer debts are de	fined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		siness debts? Business debts are debt trment or through the operation of the bu				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you ow	ve that are not consumer debts or busine	ess debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses		□ No					
	are paid that funds will be available for		□Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		☐ 100-19 ☐ 200-9		☐ 10,001-25,000 ☐ More than100,000				
19.	How much do you	□ \$0 - \$9	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,00	01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		□ \$500,0	001 - \$1 million	I More than 450 billion				
20.	How much do you	□ \$0 - \$		□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		— \$500,	001 - \$1 million		******			
Par	7: Sign Below							
For	you	I have ex	amined this petition, and I decla	are under penalty of perjury that the info	rmation provided is true and correct.			
				I am aware that I may proceed, if eligible lief available under each chapter, and I o	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.			
				ot pay or agree to pay someone who is r notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this			
		I request	relief in accordance with the ch	napter of title 11, United States Code, sp	ecified in this petition.			
					or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			garet T. Watson et T. Watson	Signature of Debt	tor 2			
			e of Debtor 1	-				
		Executed		Executed on				
			MM / DD / YYYY	M	M / DD / YYYY			

Debtor 1 Margaret T. Watso	on	Case	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.			ledge after an inquiry that the information in the			
, •	/s/ Adam C. Gomerman Signature of Attorney for Debtor	Date	July 10, 2019 MM / DD / YYYY			
	Adam C. Gomerman					
	Law Offices of Adam C. Gomerman Firm name		_			
	807 East Jericho Turnpike Huntington Station, NY 11746					
	Number, Street, City, State & ZIP Code Contact phone 631-549-1111	Email address	agomerman@optonline.net			
	2440238 NY Bar number & State		_			

Fill i	n this informa	ation to identify your	case:				
Debt	or 1	Margaret T. Watso					
Debt	or 2	First Name	Middle Name	Last Name			
(Spous	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Banl	kruptcy Court for the:	EASTERN DISTRICT (OF NEW YORK			
Case (if know	e number					_	ck if this is an
					·		-
Off	icial For	m 106Sum					
			and Liabilities a	nd Certain Statistical Inform	ation		12/15
inforr your	nation. Fill or original form	ut all of your schedule s, you must fill out a i	es first; then complete t	e are filing together, both are equally resp he information on this form. If you are filin the the box at the top of this page.			
Part	1: Summa	rize Your Assets					
							assets of what you own
1.	Schedule A/I 1a. Copy line	3: Property (Official Fo 55, Total real estate, fr	orm 106A/B) om Schedule A/B			\$	241,566.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B.			\$	6,550.00
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	248,116.00
Part	2: Summa	rize Your Liabilities					
							iabilities nt you owe
			aims Secured by Propert nn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Sch</i> e	edule D	\$	398,646.29
			Unsecured Claims (Official	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F		\$	0.00
				Your total	liabilities	\$	398,646.29
Part	3: Summa	rize Your Income and	Expenses				
		our Income (Official Fombined monthly income		e I		\$	10,406.06
5.	Schedule J: \ Copy your mo	our Expenses (Official onthly expenses from line	Form 106J) ne 22c of <i>Schedule J</i>			\$	3,666.00
Part	4: Answer	These Questions for	Administrative and Stat	tistical Records			
6.	-		er Chapters 7, 11, or 13?	? Check this box and submit this form to the co	urt with you	ur other so	chedules.
	■ Yes	Ů,	·		Í		
7.		debt do you have?					
				debts are those "incurred by an individual pr 9g for statistical purposes. 28 U.S.C. § 159.	imarily for	a persona	l, family, or
		bts are not primarily of twith your other sched		ave nothing to report on this part of the form.	Check this	box and	submit this form to
Offic		•		silities and Certain Statistical Information			nage 1 of 2

page 1 of 2

Debtor 1 Margaret T. Watson Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,544.45

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A on Cohodula E/E compthe followings	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Margaret T. \	Watson					
Debtor 1	First Name		e Name	Last Name			
Debtor 2 Spouse, if filing)	First Name	Middle	e Name	Last Name			
	Bankruptcy Court for			OF NEW YORK			
mileu States D	Sankruptcy Court for	the. LASTERN	DISTRICT	OF NEW TORK			
ase number							☐ Check if this is a amended filing
\ 4 :-:-! \(\Gamma\)	0 W 10 0 0 0 1 /D						
	orm 106A/B I Ie A/B: Pr	-					40/45
				ly once. If an asset fits in more than on			12/15
■ No. Go to Pa	art 2. e is the property?						
	stwood Drive			the property? Check all that apply			
129 Wes	stwood Drive	cription	■ Si	the property? Check all that apply ingle-family home Juplex or multi-unit building	the amount	of any secured	ims or exemptions. Put d claims on <i>Schedule D:</i>
129 Wes		cription	■ Si	ingle-family home	the amount	of any secured	
129 Wes		cription	■ Si □ □ □ □	ingle-family home Suplex or multi-unit building	the amount Creditors W	of any secured Vho Have Clain	d claims on Schedule D: ns Secured by Property.
129 Wes	ss, if available, or other desc	cription 11717-0000	■ Si □ D □ C	ingle-family home tuplex or multi-unit building condominium or cooperative	the amount	of any secured Who Have Clain	d claims on Schedule D:
129 West	ss, if available, or other desc		SI D D C C D L 2	ringle-family home puplex or multi-unit building condominium or cooperative fanufactured or mobile home and envestment property	Current val	of any secured Who Have Clain	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
129 Wesi	ood NY	11717-0000	Si D C C C I I I I I I I I I I I I I I I I	ringle-family home Puplex or multi-unit building Condominium or cooperative Itanufactured or mobile home and	the amount Creditors W Current val entire prop \$24 Describe the	of any secured who Have Claim lue of the perty?	Current value of the portion you own? \$241,566.0
129 Wesi	ood NY	11717-0000	Si D D C C C C I I I I I I I I I I I I I I	cingle-family home puplex or multi-unit building condominium or cooperative danufactured or mobile home and expression to property imeshare other s an interest in the property? Check one	Current val entire prop \$24 Describe th (such as fe a life estate	of any secured who Have Claim lue of the herty? 11,566.00 he nature of your simple, tense), if known.	Current value of the portion you own? \$241,566.0 our ownership interest ancy by the entireties, o
Street address Brentwo	ood NY	11717-0000	Si D D C C C C C C C C C C C C C C C C C	cingle-family home puplex or multi-unit building condominium or cooperative danufactured or mobile home and envestment property eimeshare other s an interest in the property? Check one debtor 1 only	Current val entire prop \$24 Describe th (such as fe a life estate	of any secured who Have Claim lue of the herty? 11,566.00 he nature of your simple, tena	Current value of the portion you own? \$241,566.0 our ownership interest ancy by the entireties, of
129 Wesi	ood NY	11717-0000	Si D C C C C C C C C C C C C C C C C C C	cingle-family home puplex or multi-unit building condominium or cooperative danufactured or mobile home and expression to property imeshare other s an interest in the property? Check one	Current valentire prop \$24 Describe th (such as fe a life estate	of any secured who Have Claim lue of the perty? 11,566.00 the nature of your se simple, tense), if known. To by the Enterprise who have the complete the compl	current value of the portion you own? \$241,566.00 curr ownership interest ancy by the entireties, o
Street address Brentwo	ood NY	11717-0000	Si D C C M In Ti O Who has	condominium or cooperative danufactured or mobile home and envestment property imeshare other s an interest in the property? Check one sebtor 1 only	Current valentire prop \$24 Describe th (such as fe a life estate Tenancy	of any secured who Have Claim lue of the perty? 11,566.00 the nature of your se simple, tense), if known. To by the Enterprise who have the complete the compl	Current value of the portion you own? \$241,566.00 our ownership interest ancy by the entireties, o
Street address Brentwo	ood NY	11717-0000	Si D D C M In Ti O Who has D D A Other int	condominium or cooperative Industrial of the property? Check one pebtor 2 only Debtor 1 and Debtor 2 only	Current valentire prop \$24 Describe th (such as fe a life estate Tenancy	of any secured who Have Claim lue of the perty? 11,566.00 the nature of your simple, tense), if known. To by the Entertructions)	current value of the portion you own? \$241,566.00 curr ownership interest ancy by the entireties, o
Street address Brentwo	ood NY	11717-0000	Si D D C M In Ti O Who has D D A Other int property	containing the composition of the debtor 2 only the least one of the debtors and another formation you wish to add about this ite.	Current valentire prop \$24 Describe th (such as fe a life estate Tenancy	of any secured who Have Claim lue of the perty? 11,566.00 the nature of your simple, tense), if known. To by the Entertructions)	current value of the portion you own? \$241,566.00 curr ownership interest ancy by the entireties, o
Brentwo City Suffolk	ood NY	11717-0000	Si D D C M In Ti O Who has D D A Other int property	containing the state of the debtors and another formation you wish to add about this iter to debtor 1 only the debtor 2 only the state one of the debtors and another formation you wish to add about this iter to deptor 1 only the debtor 2 only the debtor 3 only the debtor 3 only the debtor 4 one of the debtors and another formation you wish to add about this iter to dentification number:	Current valentire prop \$24 Describe th (such as fe a life estate Tenancy	of any secured who Have Claim lue of the perty? 11,566.00 the nature of your simple, tense), if known. To by the Entertructions)	current value of the portion you own? \$241,566.00 curr ownership interest ancy by the entireties, o

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debto	or 1	largaret T. Wat	son		Case number (if known)	
. Ca	rs, vans,	, trucks, tractors,	sport utility vel	hicles, motorcycles		
	Jo.					
_						
	es/es					
3.1	Make:	Chrysler		Who has an interest in the property? Cheek are	Do not deduct secured	claims or exemptions. Put
3.1		Town & Cou	ntry	Who has an interest in the property? Check one	the amount of any secu	red claims on Schedule D: aims Secured by Property.
	Model: Year:	2007	iiti y	Debtor 1 only		airiis Securea by Property.
		nate mileage:	142,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:	142,000	☐ At least one of the debtors and another	chine property.	portion you own.
				At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$500.00	\$500.00
3.2	Make:	Chevy		Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	Cobalt		■ Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year:	2006		Debtor 2 only	Current value of the	Current value of the
	Approxir	nate mileage:	100,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		\square At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$1,500.00	\$1,500.00
3.3	Make:	Chevy		Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model:	Cavalier		■ Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Year:	2000		Debtor 2 only	Current value of the	Current value of the
	Approxir	mate mileage:	140,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other in	formation:		\square At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$1,500.00	\$1,500.00
	mples: B			d other recreational vehicles, other vehicles, a tercraft, fishing vessels, snowmobiles, motorcycle		
			•	n for all of your entries from Part 2, including a	_	\$3,500.00
2	D	the Verry Developed				
Part 3 Do y		be Your Personal a or have any legal		erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	<i>amples:</i> No	goods and furni Major appliances, escribe		china, kitchenware		oranio or exemptions.
		Н	ousehold Goo	ds and Furnishings		\$1,500.0
				ao ana i armoningo		<u> </u>

7 Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

D	ebtor 1	Margaret T. Watson	Case number (if known)	
	☐ Yes.	Describe		
8.	Example No	bles of value es: Antiques and figurines; paintings, prints, or other artwork; book other collections, memorabilia, collectibles Describe	s, pictures, or other art objects; stamp, coin, o	r baseball card collections;
9.	Equipme Example	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bid musical instruments Describe	cycles, pool tables, golf clubs, skis; canoes an	d kayaks; carpentry tools;
10	Firearm			
	■ No □ Yes.	Describe		
11	□ No ′	s oles: Everyday clothes, furs, leather coats, designer wear, shoes, a Describe	ccessories	
		Clothing		\$500.00
13	No Yes. Non-fai Examp No Yes. Any oth No Yes. And the for Pai	Describe rm animals bles: Dogs, cats, birds, horses Describe ner personal and household items you did not already list, inc Give specific information the dollar value of all of your entries from Part 3, including any art 3. Write that number here	luding any health aids you did not list entries for pages you have attached	\$2,000.00
		scribe Your Financial Assets In or have any legal or equitable interest in any of the followin	g?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□No	oles: Money you have in your wallet, in your home, in a safe deposi		
			Cash	\$50.00
17	Examp ☐ No	ts of money les: Checking, savings, or other financial accounts; certificates of or institutions. If you have multiple accounts with the same institution nare	ution, list each.	uses, and other similar
	er res	Institution nar		

D	ebtor 1	Margare	t T. Watse	on		Case number (if known)	
			17.	1. Checking	Teacher's FCU		\$1,000.0
18	Examp ■ No			licly traded stocks ment accounts with Institution or issu	n brokerage firms, money ma	rket accounts	
19		ublicly trade enture	ed stock a	nd interests in inco	orporated and unincorpora	ted businesses, including an interest in	n an LLC, partnership, an
	■ No □ Yes.	Give specif		on about them Name of entity:		% of ownership:	
20	Negoti Non-ne ■ No	iable instrun egotiable ins	nents includ struments a	e personal checks,	egotiable and non-negotial cashiers' checks, promissor t transfer to someone by sign	y notes, and money orders.	
21		ment or pen	I	ssuer name:			
21	Examp ■ No		ts in IRA, E count sepa	RISA, Keogh, 401(k	k), 403(b), thrift savings acco	unts, or other pension or profit-sharing pla	ns
22	Your s Examp		nused depo	sits you have made		ervice or use from a company as, water), telecommunications companies	s, or others
	■ No □ Yes.				Institution name o	r individual:	
23	. Annuit No	`	·	riodic payment of m	noney to you, either for life or	for a number of years)	
24	26 U.S.			, in an account in b), and 529(b)(1).	a qualified ABLE program,	or under a qualified state tuition progr	am.
	■ No □ Yes		Institutio	n name and descrip	otion. Separately file the reco	ords of any interests.11 U.S.C. § 521(c):	
25	■ No			terests in property	y (other than anything liste	d in line 1), and rights or powers exerc	isable for your benefit
26	. Patents Examp	s, copyrigh	ts, tradema	arks, trade secrets	s, and other intellectual pro		
	■ No □ Yes.	Give specif	ic informati	on about them			
27				her general intang xclusive licenses, c		ngs, liquor licenses, professional licenses	
		Give specif	ic informati	on about them			
M	oney or	property ov	ved to you	?			Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

De	ebtor 1	Margaret T. Watson	Case number (if known)	
28.	Tax re	funds owed to you		
	■ No	•		
	☐ Yes.	Give specific information about them, including whether	er you already filed the returns and the tax years	
29.	Family	support		
			child support, maintenance, divorce settlement, property	settlement
	■ No			
		Give specific information		
30.		amounts someone owes you ples: Unpaid wages, disability insurance payments, dis	sability benefits, sick pay, vacation pay, workers' compen	sation, Social Security
	_,,,,,,,	benefits; unpaid loans you made to someone else		oanon, ooola oooani,
	■ No			
	☐ Yes.	Give specific information		
31.		sts in insurance policies		
		ples: Health, disability, or life insurance; health savings	s account (HSA); credit, homeowner's, or renter's insurance	ce
	■ No	Name the insurance company of each policy and list in	ite valua	
	□ 165.	Company name:	Beneficiary:	Surrender or refund
				value:
32.		terest in property that is due you from someone w		
	,	are the beneficiary of a living trust, expect proceeds from the bas died.	om a life insurance policy, or are currently entitled to rece	ive property because
	■ No	ino mad diod.		
	☐ Yes.	Give specific information		
33.		s against third parties, whether or not you have file		
	■ No	ples: Accidents, employment disputes, insurance claim	is, or rights to sue	
	_	Describe each claim		
	041		- to shadhan a sandanalahan a titla dahan and ababa ta	and off alphana
34.	■ No	contingent and unliquidated claims of every nature	e, including counterclaims of the debtor and rights to	set off claims
	_	Describe each claim		
35.	_ `	nancial assets you did not already list		
	■ No	Give specific information		
	— 100.	Give specific information	_	
36		the dollar value of all of your entries from Part 4, in		\$1,050.00
	for P	art 4. Write that number here		φ1,030.00
Pa	rt 5: De	escribe Any Business-Related Property You Own or Have a	an Interest In T ist any real estate in Part 1	
		own or have any legal or equitable interest in any busines to Part 6.	ss-related property?	
	_	- · · · · · · · · · · · · · · · · · · ·		
	⊔ Yes. (Go to line 38.		
Pa		escribe Any Farm- and Commercial Fishing-Related Proper you own or have an interest in farmland, list it in Part 1.	erty You Own or Have an Interest In.	
	-			
46.		u own or have any legal or equitable interest in any	r farm- or commercial fishing-related property?	
	_	Go to Part 7.		
	⊔ Yes	s. Go to line 47.		
		■ B N. All B A. V. G	Total Bridge Bridge	
16	ırt 7:	Describe All Property You Own or Have an Interest in T	nat TOU DIG NOT LIST ADOVE	

Debte	Margaret T. Watson		Case number (if known)	
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$241,566.00
56.	Part 2: Total vehicles, line 5	\$3,500.00		
57.	Part 3: Total personal and household items, line 15	\$2,000.00		
58.	Part 4: Total financial assets, line 36	\$1,050.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$6,550.00	Copy personal property tot	\$6,550.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$248,116.00

H	I in this inform	nation to identify your case:				
De	ebtor 1	Margaret T. Watson First Name	Middle Name	1	ast Name	
De	ebtor 2		auc riaine		add Hame	
(Sp	ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	nited States Bar	nkruptcy Court for the: EAS	TERN DISTRICT OF N	EW Y	ORK	
Ca	ase number					
	known)					☐ Check if this is an
						amended filing
O:	fficial For	m 106C				
		e C: The Prope	rty You Cla	im	as Exempt	4/19
the nee cas For	property you list eded, fill out and se number (if kn r each item of p	sted on Schedule A/B: Property dattach to this page as many cown). property you claim as exemp	 (Official Form 106A/B) opies of Part 2: Addition t, you must specify th 	as yo nal Pa e amo	our source, list the property that you age as necessary. On the top of any count of the exemption you claim.	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of
any fun exe	/ applicable stands—may be une emption to a page	atutory limit. Some exemptio nlimited in dollar amount. Ho	ns—such as those for wever, if you claim an	r healt exen	th aids, rights to receive certain b nption of 100% of fair market valu	enefits, and tax-exempt retirement
Pa	rt 1: Identify	y the Property You Claim as I	Exempt			
1.	Which set of	exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are cla	aiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	_	aiming federal exemptions. 11	. , .			
^			- ,,,,		fill in the information below	
۷.		erty you list on Schedule A/E	Current value of the			Specific laws that allow exemption
		on of the property and line on that lists this property	portion you own	Ame	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	129 Westwo	ood Drive Brentwood, NY	\$241,566.00	_	\$1.00	11 U.S.C. § 522(d)(1)
	11717 Suffe Debtor's Re Line from Sch	_			100% of fair market value, up to any applicable statutory limit	
	2007 Chancel	las Taura & Carratur				44 11 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	142,000 mile	ler Town & Country es	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
		edule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	•	Cobalt 100,000 miles	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(2)
	Line from Con	oddio 775. Ci			100% of fair market value, up to any applicable statutory limit	
		Cavalier 140,000 miles	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(5)
					100% of fair market value, up to any applicable statutory limit	
		Goods and Furnishings	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
	LINE HOITI SCN	euule A/D. U. I			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Debto	r1 Margaret T. Watson			Case number (if known)	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	clothing ine from Schedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
L	ine nom schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
_	cash ine from Schedule A/B: 16.1	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)
	ine non schedule A.B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Teacher's FCU	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)
L	me nom <i>Scredule A/B.</i> 11.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption Subject to adjustment on 4/01/22 and every No			ed on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	215 days before you filed this case	?
	□ No				
	☐ Yes				

Fill in this information	dontife					
Fill in this information to i						
Debtor 1 Marga First Name	ret T. Wat	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First Name	е	Middle Name	Last Name			
United States Bankruptcy C	ourt for the:	EASTERN DISTRICT OF NEV	V YORK			
Case number						
(if known)					☐ Chec	k if this is an
					amen	ided filing
Official Form 106D						
	ditors	Who Have Claims	Secure	ed by Prope	rty	12/15
Be as complete and accurate a	s possible.	f two married people are filing togetl	her, both are	equally responsible fo	r supplying correct inform	
is needed, copy the Additional number (if known).	Page, fill it	out, number the entries, and attach it	to this form.	On the top of any add	itional pages, write your na	ame and case
1. Do any creditors have claims	s secured by	your property?				
☐ No. Check this box a	nd submit tl	nis form to the court with your other	r schedules.	You have nothing els	se to report on this form.	
Yes. Fill in all of the i	nformation	below.				
Part 1: List All Secured	Claims					
		more than one secured claim, list the cre			Column B	Column C
		a particular claim, list the other creditor cal order according to the creditor's nan		Amount of claim Do not deduct the		Unsecured portion
		ū		value of collatera	l. claim	if any
2.1 Selene Finance Creditor's Name		Describe the property that secures 129 Westwood Drive Brenty	1	\$398,646.29	9 \$241,566.00	\$157,080.29
		11717 Suffolk County	wood, it i			
		Debtor's Residence				
P.O. Box 422039		As of the date you file, the claim is: apply.	Check all that			
Houston, TX 77242		Contingent				
Number, Street, City, State &	Zip Code	Unliquidated				
Who owes the debt? Check of	one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or s	secured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the debtors a		☐ Judgment lien from a lawsuit				
☐ Check if this claim relates community debt	to a	Other (including a right to offset)	First Mor	tgage		
Date debt was incurred 199)1	Last 4 digits of account num	nber <u>2175</u>	5		
-		olumn A on this page. Write that nun		\$398	,646.29	
If this is the last page of you Write that number here:	ır form, add	the dollar value totals from all pages	i .	\$398	,646.29	
David Call Others to De	Nadicia di Ca	Bald That Van Alexa halifata				
		r a Debt That You Already Listed				
trying to collect from you for a	a debt you o e debts that	e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the addition is page.	in Part 1, and	then list the collectio	n agency here. Similarly, if	f you have more
Name No. 1 Oc. 16	Dia . O	7:- 0- 4-				
Name, Number, Street, C Woods Oviatt	Jity, State & Z	rih ∩oae	On w	hich line in Part 1 did yo	ou enter the creditor? 2.1	-
Gilman, LLP			Last -	4 digits of account numb	per	
700 Crossings Blo	lg.					
2 State Street Rochester NY 146	S14					

Official Form 106D

Debtor 1	Margaret T. Wats	on		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.
 - ☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

- 3. Do any creditors have nonpriority unsecured claims against you?
 - No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 - ☐ Yes.

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

Official Form 106 E/F

-

Fill in this infor	mation to identify your	case:		
Debtor 1	Margaret T. Wats	on		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1		·	•		
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	•				
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

Debtor 1	Margaret T. Wats	son			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle None	Loot Name		
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States	Bankruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK		
Case number					Charles (Chile Service)
if known)					☐ Check if this is an amended filing
					amended liling
Official F	orm 106H				
Schedul	e H: Your Cod	lehtors			12/15
Jone da	C 11. 10di 00d				12/13
1. Do you	have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
					y states and territories include
Arizona, C	California, Idaho, Louisiana	u lived in a community pr ı, Nevada, New Mexico, Pu			
Arizona, C	california, Idaho, Louisiana to line 3.	ı, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		
Arizona, C	california, Idaho, Louisiana to line 3.		erto Rico, Texas, Wash		
Arizona, C ■ No. Go □ Yes. Di 3. In Columnin line 2 a	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb gain as a codebtor only D), Schedule E/F (Officia	n, Nevada, New Mexico, Pu ouse, or legal equivalent live tors. Do not include your if that person is a guaran	e with you at the time? spouse as a codebto ator or cosigner. Make	ington, and Wisconsin.) r if your spouse is filin sure you have listed th	g with you. List the person show he creditor on Schedule D (Officia
Arizona, C No. Go Yes. Di 3. In Columnin line 2 a Form 106 out Column	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb gain as a codebtor only D), Schedule E/F (Officia	n, Nevada, New Mexico, Pu nuse, or legal equivalent live tors. Do not include your if that person is a guaran il Form 106E/F), or Sched	e with you at the time? spouse as a codebto ator or cosigner. Make	ington, and Wisconsin.) r if your spouse is filin sure you have listed to	g with you. List the person show he creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi editor to whom you owe the debt
Arizona, C No. Go Yes. Di 3. In Columin line 2 a Form 106 out Colum	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb togain as a codebtor only D), Schedule E/F (Officia nn 2. umn 1: Your codebtor	n, Nevada, New Mexico, Pu nuse, or legal equivalent live tors. Do not include your if that person is a guaran il Form 106E/F), or Sched	e with you at the time? spouse as a codebto ator or cosigner. Make	r if your spouse is filin sure you have listed to 06G). Use Schedule D, Column 2: The cre Check all schedule	g with you. List the person show he creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi editor to whom you owe the debt es that apply:
Arizona, C No. Go Yes. Di 3. In Columnin line 2 a Form 106 out Column	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb tgain as a codebtor only D), Schedule E/F (Officia nn 2. umn 1: Your codebtor e, Number, Street, City, State and Z	n, Nevada, New Mexico, Pu nuse, or legal equivalent live tors. Do not include your if that person is a guaran il Form 106E/F), or Sched	e with you at the time? spouse as a codebto ator or cosigner. Make	r if your spouse is filin sure you have listed to 06G). Use Schedule D, Column 2: The cre Check all schedule D, lin	g with you. List the person show he creditor on Schedule D (Officia Schedule E/F, or Schedule G to f editor to whom you owe the debt es that apply:
Arizona, C No. Go Yes. Di 3. In Columnin line 2 a Form 106 out Columname 3.1	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb tgain as a codebtor only D), Schedule E/F (Officia nn 2. umn 1: Your codebtor e, Number, Street, City, State and Z	n, Nevada, New Mexico, Pu nuse, or legal equivalent live tors. Do not include your if that person is a guaran il Form 106E/F), or Sched	e with you at the time? spouse as a codebto ator or cosigner. Make	r if your spouse is filin sure you have listed to 06G). Use Schedule D, Column 2: The cre Check all schedule	g with you. List the person show he creditor on Schedule D (Officia Schedule E/F, or Schedule G to f editor to whom you owe the debt es that apply:
Arizona, C No. Go Yes. Di 3. In Columin line 2 a Form 106 out Colum Column Name 3.1	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb tgain as a codebtor only D), Schedule E/F (Officia nn 2. umn 1: Your codebtor e, Number, Street, City, State and Z	n, Nevada, New Mexico, Pu nuse, or legal equivalent live tors. Do not include your if that person is a guaran il Form 106E/F), or Sched	e with you at the time? spouse as a codebto ator or cosigner. Make	r if your spouse is filin sure you have listed to 06G). Use Schedule D, Column 2: The cre Check all schedule Schedule D, lin Schedule E/F,	g with you. List the person show he creditor on Schedule D (Officia Schedule E/F, or Schedule G to f editor to whom you owe the debt es that apply:
Arizona, C No. Go Yes. Di 3. In Columnin line 2 a Form 106 out Columname 3.1	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb tgain as a codebtor only D), Schedule E/F (Officia nn 2. umn 1: Your codebtor e, Number, Street, City, State and Z	n, Nevada, New Mexico, Pu nuse, or legal equivalent live tors. Do not include your if that person is a guaran il Form 106E/F), or Sched	e with you at the time? spouse as a codebto ator or cosigner. Make	r if your spouse is filin sure you have listed to 06G). Use Schedule D, Column 2: The cre Check all schedule Schedule D, lin Schedule E/F,	g with you. List the person show he creditor on Schedule D (Official Schedule E/F, or Schedule G to feeditor to whom you owe the debtes that apply: e
Arizona, C No. Go Yes. Di 3. In Columnin line 2 a Form 106 out Columnin line 2 a Form 106	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb tgain as a codebtor only D), Schedule E/F (Officia nn 2. umn 1: Your codebtor e, Number, Street, City, State and Z	n, Nevada, New Mexico, Puruse, or legal equivalent live tors. Do not include your if that person is a guarant Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make ule G (Official Form 1)	r if your spouse is filin sure you have listed to 106G). Use Schedule D, Column 2: The cre Check all schedule Schedule D, lin Schedule E/F,	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fine ditor to whom you owe the debtes that apply: e line e
Arizona, C No. Go Yes. Di 3. In Columin line 2 a Form 106 out Colum Name Name	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb togain as a codebtor only D), Schedule E/F (Officia nn 2. Lumn 1: Your codebtor e, Number, Street, City, State and Z e ber Street	n, Nevada, New Mexico, Puruse, or legal equivalent live tors. Do not include your if that person is a guarant Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make ule G (Official Form 1)	r if your spouse is filin sure you have listed to 106G). Use Schedule D, Column 2: The cree Check all schedule D, lin Schedule E/F, Schedule G, lin Schedule D, lin	g with you. List the person show he creditor on Schedule D (Official Schedule E/F, or Schedule G to feeditor to whom you owe the debt es that apply: e
Arizona, C No. Go Yes. Di 3. In Columnin line 2 a Form 106 out Columnin line 2 a Form 106	California, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb togain as a codebtor only D), Schedule E/F (Officia nn 2. Lumn 1: Your codebtor e, Number, Street, City, State and Z e ber Street	n, Nevada, New Mexico, Puruse, or legal equivalent live tors. Do not include your if that person is a guarant Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make ule G (Official Form 1)	r if your spouse is filin sure you have listed to commo 2: The cree Check all schedule D, lin Schedule E/F, Schedule G, lin Schedule D, lin Schedule B, lin Sc	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fixed to to whom you owe the debt es that apply: e ine e e e
Arizona, C No. Go Yes. Di 3. In Columnin line 2 a Form 106 out Columnin line 2 a Form 106	california, Idaho, Louisiana to line 3. d your spouse, former spo n 1, list all of your codeb togain as a codebtor only D), Schedule E/F (Officia nn 2. umn 1: Your codebtor e, Number, Street, City, State and Z e ber Street	n, Nevada, New Mexico, Puruse, or legal equivalent live tors. Do not include your if that person is a guarant Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make ule G (Official Form 1)	r if your spouse is filin sure you have listed to 106G). Use Schedule D, Column 2: The cree Check all schedule D, lin Schedule E/F, Schedule G, lin Schedule D, lin	g with you. List the person show he creditor on Schedule D (Official Schedule E/F, or Schedule G to feeditor to whom you owe the debt es that apply: e

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EIII	in this information to identify your ca	ase							
	btor 1 Margaret T.								
	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for the	: EASTERN DISTRICT	OF NEW YORK		_				
	se number nown)		-			heck if this is: An amende Asuppleme	d filing ent showing po		hapter
\bigcirc	fficial Form 106I						as of the follow	ing date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
Be a sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	sible. If two married peo are married and not fili r spouse is not filing w	ng jointly, and your s ith you, do not includ	spouse is de inforn	s living v nation ab	vith you, inclu oout your spo	ude informations. If more s	on about y space is ne	our eeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	spouse	
	If you have more than one job,		■ Employed			■ Emplo			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed			☐ Not er	mployed		
		Occupation	Pool Attendant			Retired			
	Include part-time, seasonal, or self-employed work.	Employer's name	NYS Pool Manag	gement	Long				
	Occupation may include student or homemaker, if it applies.	Employer's address							
			Islandia, NY						
		How long employed t	here? 2 month	h		_			
Pai	rt 2: Give Details About Mor	nthly Income							
spoi	mate monthly income as of the duse unless you are separated.		,		•		•	•	J
	e space, attach a separate sheet to			irioi ali ci	проуста	nor that perso		bolow. II yo	od ricca
					For	Debtor 1	For Debtor non-filing s		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,755.57	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$:	3,755.57	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Margaret T. Watson		Cas	e number (if known)				
				Fo	r Debtor 1		r Debtor 2		
	Cor	by line 4 here	4.	\$	3,755.57	noi \$	n-filing sp	0.00	
	COL	y line 4 nere	4.	Ψ_	3,755.57	Ψ_		0.00	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	468.39	\$_		0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$_		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$_		0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$_		0.00	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$ \$	0.00	\$_ \$		0.00	
	5g.	Union dues	5g.	\$ \$	0.00	\$ \$		0.00	
	5h.	Other deductions. Specify:	5h.+	: -		+ \$-		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	– 6.	\$	468.39	\$		0.00	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,287.18	* \$		0.00	
				Ψ_	3,207.10	Ψ_		0.00	
8.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90	\$	0.00	¢		0.00	
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$ \$	0.00	\$_ \$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	ob.	Ψ_	0.00	Ψ_		0.00	
		settlement, and property settlement.	8c.	\$	0.00	\$		0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	
	8e.	Social Security	8e.	\$_	0.00	\$_	2,3	30.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$		0.00	
	8g.	Pension or retirement income	_ 8g.	\$	0.00	\$	1,5	38.88	
	8h.	Edward Watson, III- Son's Other monthly income. Specify: Contribution	8h.+	- \$	1,500.00	+ \$		0.00	
		Michael Watson, Son's Contribution	_	\$	1,000.00	\$		0.00	
		Joseph Watson, Son's Contribution	_	\$	750.00	\$		0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	3,250.00	\$_	3,8	868.88	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		6,537.18 + \$_	3,	,868.88	\$ _1	0,406.06
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		Schedule J	<i>J</i> . + \$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies					e. 12.	\$1	0,406.06
13.	Do :	you expect an increase or decrease within the year after you file this form?	?					Combin nonthly	ed / income
		No. Yes. Explain:							

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:							
Deb	tor 1	Margaret T. \	Watson			Ch	neck i	f this is:		
Doh	itor 2							amended filing	ving postpetition chapter	
	ouse, if filing)								the following date:	
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF NEW Y	ORK		M	M / DD / YYYY		
	e number nown)									
Oi	fficial Fo	rm 106J			!	l				
Sc	chedule	J: Your	Exper	ises					12/	15
Be	as complete a	and accurate as	possible.	If two married people a ch another sheet to this						
		ibe Your House	hold							
1.	Is this a join No. Go to									
	☐ Yes. Doe	s Debtor 2 live i	in a separa	ate household?						
	□ No		st file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of D	ebtor	2.		
2.	Do you have	e dependents?	■ No							
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state								□ No	
	dependents	names.							☐ Yes ☐ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.	expenses of	enses include f people other tl d your depende	han 👝	No Yes					_ 166	
Est exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a sup						•
the	lude expense value of such ficial Form 10	n assistance an	non-cash o	government assistance luded it on <i>Schedule I:</i> Y	if you know Your Income			Your expe	enses	
, 5.1		,								
4.		or home owners and any rent for the		ses for your residence. I r lot.	Include first mortgage		\$_		1,556.00	
	If not includ	led in line 4:								
		estate taxes				4a.			0.00	
	•	rty, homeowner's				4b.			0.00	
		maintenance, re owner's associat	•	ıpkeep expenses dominium dues		4c. 4d.	- : -		0.00 0.00	
5.				our residence, such as ho	ome equity loans		\$ -		0.00	

Debtor 1	Margare	t T. Watson	Case num	ber (if known)	
i. Utili	ities:				
6a.		, heat, natural gas	6a.	\$	200.00
6b.		wer, garbage collection	6b.	· ·	25.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	· :	150.00
6d.	Other. Sp		6d.	· -	0.00
				· ·	
		ekeeping supplies	7.	·	500.00
_		children's education costs	8.	·	0.00
		lry, and dry cleaning	9.	\$	100.00
	•	products and services	10.	\$	200.00
1. Med	dical and de	ntal expenses	11.	\$	100.00
		. Include gas, maintenance, bus or train fare. ear payments.	12.	\$	400.00
		clubs, recreation, newspapers, magazines, and boo			0.00
		tributions and religious donations	14.	· -	
	iritable com	and rengious dollations	14.	Ψ	0.00
		nsurance deducted from your pay or included in lines 4 c	r 20		
	. Life insura		1 20. 15a.	\$	0.00
	. Health ins		15a. 15b.	·	0.00
				· -	
	. Vehicle in		15c.	· -	120.00
		urance. Specify:	15d.	\$	0.00
		nclude taxes deducted from your pay or included in lines		•	
	cify:		16.	\$	0.00
		ease payments:	_		
		ents for Vehicle 1	17a.	· · · · · · · · · · · · · · · · · · ·	315.00
		ents for Vehicle 2	17b.	\$	0.00
17c.	. Other. Sp	ecify:	17c.	\$	0.00
17d.	. Other. Sp	ecify:	17d.	\$	0.00
		of alimony, maintenance, and support that you did			0.00
		your pay on line 5, Schedule I, Your Income (Official		· -	0.00
9. Oth	er payment	s you make to support others who do not live with y	ou.	\$	0.00
	cify:		19.	<u> </u>	
). Oth	er real prop	erty expenses not included in lines 4 or 5 of this for	n or on Schedule I: Yo	our Income.	
20a	 Mortgage 	s on other property	20a.	\$	0.00
20b	. Real esta	te taxes	20b.	\$	0.00
20c.	. Property,	homeowner's, or renter's insurance	20c.	\$	0.00
		nce, repair, and upkeep expenses	20d.	\$	0.00
		ner's association or condominium dues	20e.	·	0.00
	er: Specify:	.s. s association of condominatin addo		+\$	0.00
i. Oth	er. Specify.			- φ	0.00
2. Calo	culate your	monthly expenses			
	-	through 21.		\$	3,666.00
		2 (monthly expenses for Debtor 2), if any, from Official F	orm 106J-2	\$	
				\$	2 666 00
220.	. Auu IIII e 22	a and 22b. The result is your monthly expenses.		Ψ	3,666.00
3. Cal	culate your	monthly net income.		L	
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	10,406.06
		r monthly expenses from line 22c above.	23b.		3,666.00
_00	. 55pj jou		200.	-	3,000.00
23c	Subtract	your monthly expenses from your monthly income.			
200.		t is your monthly net income.	23c.	\$	6,740.06
4. Do y	you expect	an increase or decrease in your expenses within the	year after you file this	s form?	
For e	example, do y	ou expect to finish paying for your car loan within the year or do terms of your mortgage?			or decrease because of a
	No.				
		Evalois horos			
	res.	Explain here:			

Fill in this info	rmation to identify your	case:			
Debtor 1	Margaret T. Wats				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number					
(if known)					Check if this is an amended filing
If two married p You must file th obtaining mone	people are filing together	r, both are equally respoi le bankruptcy schedules n connection with a bank		ct information. //aking a false state	ement, concealing property, or 00, or imprisonment for up to 20
Sig	gn Below				
Did you p	eay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, ,, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed v	with this declaration	on and
X /s/ Ma	argaret T. Watson		Х		
Marga	aret T. Watson cure of Debtor 1		Signature of De	ebtor 2	
Date	July 10, 2019		Date		

Official Form 106Dec

-:1	lin this inform					
		nation to identify you				
De	ebtor 1	Margaret T. Wat	Middle Name	Last Name		
1 -	ebtor 2					
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
	se number _					
(if k	known)					Check if this is an
						imended filing
\bigcirc	fficial Ec	rm 107				
	fficial Fo		Affaira far Indivis	duala Filipa for F) and lemma to	
			Affairs for Individ			4/19
					equally responsible for sup y additional pages, write you	
		n). Answer every que		с с	y uuumona pugoo, mmo yo	
Pa	rt 1: Give D	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
•	What is you	our one maritar state				
	■ Married					
	☐ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	V.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1	Debtor 2 Prior Ad	ddress:	Dates Debtor 2
			lived there			lived there
3.					nity property state or territor	
stat	tes and territori	ies include Arizona, Ca	ilifornia, idano, Louisiana, ive	vada, New Mexico, Puerto R	ico, Texas, Washington and V	visconsin.)
	No					
	☐ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explai	in the Sources of You	r Income			
4.			nployment or from operatin u received from all jobs and a		ear or the two previous cale time activities.	ndar years?
			have income that you receive			
	□ No					
	Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
F.,	em lenuemi 1	of accurant year contil	5	,	.	,
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$5,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	
	r last calenda	r year: ecember 31, 2018)	☐ Wages, commissions,	\$10,132.00	☐ Wages, commissions,	\$0.00
(Jč	anuany i to De		bonuses, tips		bonuses, tips	
			☐ Operating a business		☐ Operating a business	
Offic	cial Form 107		Statement of Financial Aff	airs for Individuals Filing for E	sankruptcy	page 1

Debtor 1 N	largaret T. Watson		Case	e number (if known)	
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ndar year before that: o December 31, 2017		\$4,834.00	☐ Wages, commissions bonuses, tips	\$0.00
		☐ Operating a business		☐ Operating a business	
Include in and othe winnings List each	ncome regardless of we fr public benefit payments. If you are filing a joint	hether that income is taxable. Exerts; pensions; rental income; intercase and you have income that income from each source separa	amples of other income are a rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; nly once under Debtor 1.	
□ No ■ Yes	s. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
For last cale (January 1 to	endar year: o December 31, 2018	Pension and SSI)	\$7,736.00		
	ndar year before that: o December 31, 2017		\$46,400.00		
For the cale (January 1 to	ndar year: o December 31, 2016	Pension and SSI	\$46,200.00		
6. Are eithe	er Debtor 1's or Debtor Neither Debtor 1 no individual primarily for During the 90 days. No. Go to ling Yes List below paid the not inclustrated to adjustrate to adjustrate to adjustrate to adjustrate to the note of During the 90 days. No. Go to ling Yes List below include	ow each creditor to whom you pai at creditor. Do not include paymer ude payments to an attorney for t ment on 4/01/22 and every 3 year 2 or both have primarily consu- before you filed for bankruptcy, di	r debts? umer debts. Consumer debts old purpose." id you pay any creditor a total id a total of \$6,825* or more ints for domestic support oblig his bankruptcy case. is after that for cases filed on umer debts. id you pay any creditor a total id a total of \$600 or more and	of \$6,825* or more? In one or more payments are ations, such as child support or after the date of adjustment of \$600 or more?	and the total amount you out and alimony. Also, do nent.
Credito	r's Name and Addres	S Dates of payme	ent Total amount	Amount you Was th	is payment for

Del	otor 1 Margaret T. Watson		Cas	se number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
	Ford Motor Credit Box 220564 Pittsburgh, PA 15157	12/1/17, 1/1/189 & 2/1/18	\$315.00	\$13,200.00	☐ Mortgage ☐ Car ☐ Credit Care ☐ Loan Repa ☐ Suppliers o	yment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general ny managing ag	partner; corporation ent, including one fo
	No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	nis payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a dek	ot that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	
	t 4: Identify Legal Actions, Repossession		paiu	Still Owe	moduce crediti	or s name
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	Wells Fargo Home Mortgage vs. Debtor 2877-2013	Foreclosure	Supreme, Suffe	olk	☐ Pending ☐ On appea ☐ Concluded	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below	, , , , ,	erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	No. Go to line 11.☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property Explain what happened	d	Date		Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fii	nancial institutior	ı, set off any an	nounts from your
	Creditor Name and Address	Describe the action the	e creditor took		action was	Amount
				taker		

Deb	btor 1 Margaret T. Watson		Case number (if known)					
12.	Within 1 year before you filed fo court-appointed receiver, a cust		as any of your property in the possession of an a er official?	ssignee for the bene	fit of creditors, a				
	■ No □ Yes								
Par	rt 5: List Certain Gifts and Con	ntributions							
13.	■ No		lid you give any gifts with a total value of more th	nan \$600 per person?	•				
	Yes. Fill in the details for each Gifts with a total value of more per person		Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Address:	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed f ■ No	for bankruptcy, d	lid you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?				
	☐ Yes. Fill in the details for each								
	Gifts or contributions to chariti more than \$600 Charity's Name Address (Number, Street, City, State a		Describe what you contributed	Dates you contributed	Value				
Par	rt 6: List Certain Losses								
		or bankruptcy or	since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster,				
	☐ Yes. Fill in the details.								
	Describe the property you lost how the loss occurred	Include	the amount that insurance has paid. List pending	Date of your loss	Value of property lost				
		insuran	ce claims on line 33 of Schedule A/B: Property.						
Par	rt 7: List Certain Payments or	Transfers							
16.	consulted about seeking bankru	uptcy or preparin	d you or anyone else acting on your behalf pay on go a bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you				
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Law Offices of Adam C. Go 807 East Jericho Turnpike Huntington Station, NY 117 agomerman@optonline.net	merman 46	Attorney Fees	7/10/19	\$2,500.00				

٥n

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you list	or to make payments			r transfer any proper	ty to anyone who		
	■ No							
	☐ Yes. Fill in the details.							
	Person Who Was Paid Address	Description and va transferred	llue of any prop	erty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your businclude both outright transfers and transfers made	iness or financial affai	rs?					
	include gifts and transfers that you have already li No		io granting or a sc	bodiny interes	t of mongage on your	proporty). Do not		
	Yes. Fill in the details.							
	Person Who Received Transfer Address		Description and value of property transferred payments received or debts paid in exchange			Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No		property to a se	elf-settled tru	ist or similar device o	of which you are a		
	Yes. Fill in the details.							
	Name of trust	Description and va	lue of the prope	erty transferre	ed	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stor	age Units				
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa	other financial accoun	ts; certificates o	of deposit; sh				
	■ No □ Yes. Fill in the details.	ŕ						
	Name of Financial Institution and L	ast 4 digits of	Type of accoun	t or Dat	te account was	Last balance		
		ccount number	instrument	clo mo	sed, sold, oved, or nsferred	before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No							
	Yes. Fill in the details.							
	Name of Financial Institution	Who else had acce	ess to it?	Describe the	contents	Do you still		
	Address (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)		occornse the t	onicino	have it?		
22.	Have you stored property in a storage unit or p	place other than your	home within 1 ye	ear before yo	u filed for bankruptc	y?		
	■ No							
	☐ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hato it? Address (Number, State and ZIP Code)		Describe the (contents	Do you still have it?		
		,						

Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that some for someone.	one else owns? Include any proper	rty yo	ou borrowed from, are storing for	r, or hold in trust			
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value			
Par	t 10: Give Details About Environmental Inform	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	_	•				
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s wa	ste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of wher	n the	ey occurred.				
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	unc	ler or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admini	strative proceeding under any envi	ironr	mental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11: Give Details About Your Business or Cor	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of	the following connections to any	y business?			
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	, eith	er full-time or part-time				
	.LP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	tive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Official Form 107

Debtor 1 Margaret T. Watson

Case number (if known)

	■ No. None of the above applies. Go to Part 12.					
	Yes. Check all that apply above and fill in the details below for each business.					
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed			
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.					
	No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

Official Form 107

Debtor 1 Margaret T. Watson

Debtor 1	Margaret T. Wat	son	Case number (if known)
	lo: n.		
Part 12:	Sign Below		
are true a with a bar	nd correct. I unders	tand that making a false statement, concealing propo esult in fines up to \$250,000, or imprisonment for up	ts, and I declare under penalty of perjury that the answers erty, or obtaining money or property by fraud in connection to 20 years, or both.
/s/ Marg	aret T. Watson		
-	et T. Watson e of Debtor 1	Signature of Debtor 2	
Date J	uly 10, 2019	Date	
Did you a	ttach additional pag	es to Your Statement of Financial Affairs for Individu	uals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you p	ay or agree to pay s	omeone who is not an attorney to help you fill out ba	ankruptcy forms?
■ No			
☐ Yes. Na	ame of Person	. Attach the Bankruptcy Petition Preparer's Notice, Dec	laration, and Signature (Official Form 119).

Fill in this information to identify your case:			
Debtor 1	Margaret T. Watson		
Debtor 2 (Spouse, if filing)			
United States B	ankruptcy Court for the: Eastern District of New York		
Case number (if known)			

Check as directed in lines 17 and 21:				
	ording to the calculations required by this ement:			
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).			
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).			
	3. The commitment period is 3 years.			
	4. The commitment period is 5 years.			

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 3,755.57 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 vou listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

ebtor 1	Margaret T. Watson		Case nu	ımber (<i>if know</i>	n)		
			Column Debtor			_	
7. I n	terest, dividends, and royalties		\$	0.00) \$	0.00	
8. U r	nemployment compensation		\$	0.00	\$	0.00	
	o not enter the amount if you contend that the amount receive Social Security Act. Instead, list it here:	ved was a benefit und	er				
	For you\$	0.00					
	For your spouse \$	0.00					
	ension or retirement income. Do not include any amount repending the Social Security Act.	eceived that was a	\$	0.00) \$	1,538.88	
Do red do	come from all other sources not listed above. Specify the point include any benefits received under the Social Security ceived as a victim of a war crime, a crime against humanity, prestic terrorism. If necessary, list other sources on a separatal below.	Act or payments or international or					
	Family Support		\$	3,250.00) \$	0.00	
			\$	0.00) \$	0.00	
	Total amounts from separate pages, if any.		+ \$	0.00) \$	0.00	
	alculate your total average monthly income. Add lines 2 that column. Then add the total for Column A to the total for Colu		7,005.5	7_ + \$	1,538.88	s_ = s	8,544.45
	opy your total average monthly income from line 11					\$	8,544.45
10. G C	•						
		0 below.					
	You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column dependents, such as payment of the spouse's tax liability						
	Below, specify the basis for excluding this income and the adjustments on a separate page.	e amount of income of	devoted to e	each purpo	se. If necessa	ary, list addit	ional
	If this adjustment does not apply, enter 0 below.						
		\$ _					
		Ψ					
	Total	\$		0.00	Copy here=>		0.00
14. Y	our current monthly income. Subtract line 13 from line 12	2.				\$	8,544.45
15. C	Calculate your current monthly income for the year. Follows	ow these steps:					
1	5a. Copy line 14 here=>					\$	8,544.45
	Multiply line 15a by 12 (the number of months in a yea					x 1	12
1	5b. The result is your current monthly income for the year	for this part of the for	m			\$10	02,533.40

Debtor 1

Debt	or 1	Margaret T. Watson		Case number (if known)		
16	. Cal	culate the median family income that applies to	ou. Follow these step	os:		
	16a	. Fill in the state in which you live.	NY			
	16b	. Fill in the number of people in your household.	2			
	16c	Fill in the median family income for your state and	size of household.		\$	71,343.00
		To find a list of applicable median income amounts instructions for this form. This list may also be ava			Ψ_	
17	. Hov	v do the lines compare?				
	17a	Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcuyour current monthly income from line 14 a	ulation of Your Dispo			
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Cop	y your total average monthly income from line 1	1		. \$	8,544.45
19.	con	luct the marital adjustment if it applies. If you are tend that calculating the commitment period under 1 use's income, copy the amount from line 13.	married, your spouse 1 U.S.C. § 1325(b)(4)	is not filing with you, and you allows you to deduct part of your		
	19a	. If the marital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
	19b	Subtract line 19a from line 18.			\$	8,544.45
20.	Cal	culate your current monthly income for the year.	Follow these steps:			
	20a	. Copy line 19b			\$_	8,544.45
		Multiply by 12 (the number of months in a year).			,	(12
	20b	. The result is your current monthly income for the y	ear for this part of the	form	\$_	102,533.40
	200	Copy the median family income for your state and	aiza of household from	n line 16a	\$	71,343.00
	200	Copy the median family income for your state and	size of flousefloid froi	it lifte Toc	Ψ-	71,040.00
	21.	How do the lines compare?				
		☐ Line 20b is less than line 20c. Unless otherwing period is 3 years. Go to Part 4.	se ordered by the cou	rt, on the top of page 1 of this form, c	heck box 3,	The commitment
		Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwise ordere	d by the court, on the top of page 1 o	f this form, cl	heck box 4, <i>The</i>
Par	t 4:	Sign Below				
	Ву	signing here, under penalty of perjury I declare that	he information on this	statement and in any attachments is	true and cor	rect.
,	(Is	Margaret T. Watson				
•	Ma	argaret T. Watson				
	•	gnature of Debtor 1				
	Date	# July 10, 2019 MM / DD / YYYY				
	If yo	ou checked 17a, do NOT fill out or file Form 122C-2.				
	If yo	ou checked 17b, fill out Form 122C-2 and file it with	this form. On line 39 o	f that form, copy your current monthly	income fron	n line 14 above.

E:::::::::::::::::::::::::::::::::::::	Alaia in farmanation as islandific.			
Debto	this information to identify your case: Margaret T. Watson			
Debto	r 2 se, if filing)			
United	States Bankruptcy Court for the: _Eastern District of New York			
Case i	number wn)	☐ Chec	k if this is an amende	ed filing
	pter 13 Calculation of Your Disposable	Income		04/19
	out this form, you will need your completed copy of <i>Chapter 13 Stater</i> itment Period (Official Form 122C-1).	nent of Your Current Monthly	/ Income and Calculat	ion of
Be as o	complete and accurate as possible. If two married people are filing too is needed, attach a separate sheet to this form, Include the line numbinal pages, write your name and case number (if known).			
Dec exp 122	Internal Revenue Service (IRS) issues National and Local Standards questions in lines 6-15. To find the IRS standards, go online using the treation may also be available at the bankruptcy clerk's office. Ituct the expense amounts set out in lines 6-15 regardless of your actual expenses if they are higher than the standards. Do not include any operating expenses of the properties of the	e link specified in the separate pense. In later parts of the form expenses that you subtracted from	te instructions for this n, you will use some of om income in lines 5 ar	s form. This
Not	e: Line numbers 1-4 are not used in this form. These numbers apply to info	rmation required by a similar fo	orm used in chapter 7 c	ases.
5.	The number of people used in determining your deductions from inc. Fill in the number of people who could be claimed as exemptions on your plus the number of any additional dependents whom you support. This number of people in your household.	federal income tax return,	2	
Nat	ional Standards You must use the IRS National Standards to an	swer the questions in lines 6-7		
6.	Food, clothing, and other items: Using the number of people you enter Standards, fill in the dollar amount for food, clothing, and other items.	ed in line 5 and the IRS Nation	al \$	1,288.00
7.	Out-of-pocket health care allowance: Using the number of people you the dollar amount for out-of-pocket health care. The number of people is a people who are 65 or older-because older people have a higher IRS allo higher than this IRS amount, you may deduct the additional amount on line	split into two categoriespeople wance for health car costs. If y	e who are under 65 and	l

Official Form 122C-2

Jebtor 1		nargaret 1. watson				Case number (KIIOWII)		
Peor	ole v	who are under 65 years of age							
	7a.	Out-of-pocket health care allowance per person	\$	55					
	7b.	Number of people who are under 65	Χ	2					
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	110.00		Copy here=	> \$	110.00	
Peop	ole v	who are 65 years of age or older							
	7d.	Out-of-pocket health care allowance per person	\$	114					
	7e.	Number of people who are 65 or older	X	0					
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=	> \$	0.00	
	7g.	Total. Add line 7c and line 7f			\$	110.00	Сору	total here=>	\$110.00
Loca	al St	andards You must use the IRS Local Standards t	n answ	er the guestion	ns in lin	es 8-15			
Base	ed o	n information from the IRS, the U.S. Trustee Pro		•			d for hous	ing for	
_	•	tcy purposes into two parts:							
_		ing and utilities - Insurance and operating expen	ses						
		ing and utilities - Mortgage or rent expenses er the questions in lines 8-9, use the U.S. Truste	- D	l T.	£:	1		a. 4la a 1lan la ac	a aitia din tha
sepa 8.	rate Hou	e instructions for this form. This chart may also be using and utilities - Insurance and operating expense to dollar amount listed for your county for insurance	oe avail: enses:	able at the ba Using the nun	ankrupt ober of p	cy clerk's of	fice.		695.00
		using and utilities - Mortgage or rent expenses:	and ope	erating expens				*_	
		Using the number of people you entered in line 5, listed for your county for mortgage or rent expense		e dollar amour	ıt		\$	2,312.00	
	9b.	Total average monthly payment for all mortgages a	and othe	er debts secur	ed by y	our home.			
		To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptor. Next divide by 60							
		for bankruptcy. Next divide by 60.		_					
		Name of the creditor		Average mon payment	thly				
		-NONE-		\$					
		· ·			0.00	Сору		0.00	Repeat this amount
		9b. Total average monthly paymer	nt \$	<u> </u>	0.00	here=>	-\$	0.00	on line 33a.
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, en		9a (mortgage	;	\$	2,312.00	Copy here=>	\$\$
	affe	ou claim that the U.S. Trustee Program's division ects the calculation of your monthly expenses, fill application why:					is incorred	ct and	\$

Debtor '	Marga	aret T. Watson		Case number (if known)	_
11.	Local tra	nsportation expenses: Check the number of vehic	cles for which you clair	im an ownership or operating expense.	
	□ 0. Go	to line 14.			
	☐ 1. Go	to line 12.			
	☐ 2 or m	ore. Go to line 12.			
12.		peration expense: Using the IRS Local Standards expenses, fill in the <i>Operating Costs</i> that apply for			0
13.	You may			the net ownership or lease expense for each vehicle below in the vehicle. In addition, you may not claim the expense f	
Ve	ehicle 1	Describe Vehicle 1:			
13a	a. Ownershi	p or leasing costs using IRS Local Standard		\$	
13b	•	monthly payment for all debts secured by Vehicle 1 clude costs for leased vehicles.			
	are contra	ate the average monthly payment here and on line actually due to each secured creditor in the 60 montry. Then divide by 60.		that	
	Nam	ne of each creditor for Vehicle 1	Average monthly payment		
			\$		
		Total Average Monthly Payment	\$	Copy Repeat this amount on line 33b.	
130		cle 1 ownership or lease expense ine 13b from line 13a. if this number is less than \$0	, enter \$0	\$ 0.00 Copy net Vehicle 1 expense here => \$ 0.00	<u>0</u>
Ve	ehicle 2	Describe Vehicle 2:			
130	l. Ownershi	p or leasing costs using IRS Local Standard		\$ <u>0.00</u>	
13e	e. Average i leased ve	monthly payment for all debts secured by Vehicle 2 hicles.	. Do not include costs t	s for	
	Nam	ne of each creditor for Vehicle 2	Average monthly payment		
			\$		
		Total average monthly payment	\$	Copy Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease expense ine 13e from line 13d. if this number is less than \$0	, enter \$0	Copy net Vehicle 2 expense here => \$ 0.00	0_
14.		ansportation expense: If you claimed 0 vehicles ransportation expense allowance regardless of v			0
15.	also dedu	al public transportation expense: If you claimed a lot a public transportation expense, you may fill in what the IRS Local Standard for Public Trans	hat you believe is the		0

Case number (if known)

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$	468.39
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or		
	administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required:		
	as a condition for your job, or		0.00
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care		
	that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed under the IRS expense allowances.	\$	4,873.39
A .I.	Add lines 6 through 23.		
Add	Itional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.		
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	r	
	Health insurance \$ 0.00		
	Disability insurance \$ 0.00		
	Health savings account + \$ 0.00		
	Total \$ 0.00 Copy total here=>	\$	0.00
	Do you actually spend this total amount?		
	No. How much do you actually spend?		
	■ Yes \$		
26.	Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for our household or member of your immediate family who is unable to pay for our household or members.		
	your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b)	\$	0.00
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.	_	
	By law, the court must keep the nature of these expenses confidential.	\$	0.00

Margaret T. Watson

Debtor 1

btor 1	Margaret T. Watson	Case number (if known)			
28.	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and operating expense	s on		
	If you believe that you have home energy c 8, then fill in the excess amount of home er	costs that are more than the home energy costs included in expenses onergy costs	on line		
	You must give your case trustee documents amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the additional ary.		\$	0.00
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly expenses (not more that expendent children who are younger than 18 years old to attend a private process of the pr	n te or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.			
	* Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or after the date of adjustmer	nt.	\$	0.00
		he monthly amount by which your actual food and clothing expenses a g allowances in the IRS National Standards. That amount cannot be m s in the IRS National Standards.			
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.			
	You must show that the additional amount of	claimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	e amount that you will continue to contribute in the form of cash or final anization. 11 U.S.C. $\S 548(d)(3)$ and (4) .	ncial		
	Do not include any amount more than 15%	of your gross monthly income.		\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	tions.		\$	0.00
	uctions for Debt Payment				
Ded	actions for Debt Payment				
33. F	·	in property that you own, including home mortgages, vehicle 33a through 33e.			
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines	ent, add all amounts that are contractually due to each secured			
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines of calculate the total average monthly paym	ent, add all amounts that are contractually due to each secured		Average I	monthly
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bath Mortgages on your home	s 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	I	Average i payment	
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here	ent, add all amounts that are contractually due to each secured	I	payment	monthly
33. F	For debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles	a 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	I	payment	
33. F I o	For debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bank Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	s 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	.=> \$	payment	0.00
33. F I o	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for bank of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	a 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	.=> : .:=> :	payment	0.00
33. F 1 33a. 33a. 33b. 33c. 33d.	For debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bank Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	s 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	=> :: => :: => ::	payment	0.00
33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bank Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	a 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does payme include taxe	=> :: => :: => ::	payment	0.00
33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines to calculate the total average monthly paymereditor in the 60 months after you file for bank Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	a 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does payme include taxe or insurance.	=> (: => (: => (:	B	0.00
33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for bank of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	a 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does payme include taxe or insurance. No Yes	=> :: => :: => ::	B	0.00
33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for bank of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payme include taxe or insurance No Yes No No No No No No No	=> (: => (: => (:	B	0.00
33. F I 33a. 33b. 33c. 33d.	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for bank of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	a 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does payme include taxe or insurance. No Yes	=> (: => (: => (:	5	0.00
33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for bank of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payme include taxe or insurance No Yes No No No No No No No	=> 3 => 3 => 3 ent	5	0.00
33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for bank of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payme include taxe or insurance or	=> 3 => 3 => 3 ent	payment b	0.00
33. F I C C C C C C C C C C C C C C C C C C	For debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymereditor in the 60 months after you file for bank of Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt Does payme include taxe or insurance or	=> \(\) => \(\) => \(\) => \(\) => \(\) ==	payment b	0.00

iviai	garet 1. watson			Cas	e number (11				
					·,				
No.	Go to line 35.								
☐ Yes.	listed in line 33, to keep po	ossession of your proper	ty (called the c						
ne of the	creditor	Identify property that s	ecures the deb	t	Total cur	e amount			ire
ONE-				\$			÷ 60 = \$		
				Total	\$	0.00	total here=>	\$	0.00
					nat				
No.	Go to line 36.								
	Fill in the total amount of a	all of these priority claims ch as those you listed in	. Do not includ	le current or					
	Total amount of all past-o	due priority claims			\$	0.00	÷ 60	\$	0.00
Projecte	d monthly Chapter 13 plar	n payment			\$				
Office of he Exec o find a li	the United States Courts (fourtive Office for United State list of district multipliers that included	or districts in Alabama an s Trustees (for all other outliers of the state of the s	d North Caroli districts). using the link sp	na) or by ecified in the	x				
Average	monthly administrative expe	ense			\$				
		t payment.						\$	0.00
l Deduc	tions from Income								
Add all d	of the allowed deductions.								
			\$	4,873.39) —				
Copy lir				0.00)				
Copy lir	ne 37, All of the deductions	for debt payment	+\$	0.00					
Total de	eductions		\$	4,873.39	Copy	/ total here=>	\$	i	4,873.39
	Are any or other No. Yes. No you one of the DNE- No. Yes. No. Yes. Projecte Current r Diffice of the Exection of find a life parate in the project of the Exection of the Execution of the Execut	Are any debts that you listed in line of other property necessary for you listed in line 35. Yes. State any amount that you listed in line 33, to keep por Next, divide by 60 and fill in the of the creditor DNE- Do you owe any priority claims - sure past due as of the filling date of the creditor No. Go to line 36. Yes. Fill in the total amount of all past-of projected monthly Chapter 13 plants. Current multiplier for your district as office of the United States Courts (for line 25 courts (for line 26 courts) (for line 27 courts) (for line 28 courts) (for line 28 courts) (for line 29 courts) (for line 30 co	Are any debts that you listed in line 33 secured by your per other property necessary for your support or the support or other property necessary for your support or the support or other property necessary for your support or the support of the support of the supposession of your property. No. Go to line 33, to keep possession of your property Next, divide by 60 and fill in the information below. Identify property that suppose of the creditor DNE- No. Go to line 36. Yes. Fill in the total amount of all of these priority claims ongoing priority claims, such as those you listed in Total amount of all past-due priority claims. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued of the United States Courts (for districts in Alabama and the Executive Office for United States Trustees (for all other of find a list of district multipliers that includes your district, go online eparate instructions for this form. This list may also be available at the other continuous property in the deductions for debt payment. Add all of the deductions for debt payment. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Copy line 37, All of the additional expense deductions. Copy line 37, All of the deductions for debt payment	Are any debts that you listed in line 33 secured by your primary reside or other property necessary for your support or the support of your defeat of other property necessary for your support or the support of your defeat of the property necessary for your support or the support of your defeat of the property (called the content of your object of your property (called the content of your property that secures the debendance of the creditor of the property that secures the debendance of the creditor of the creditor of the secure of the property claims of the property that secures the debendance of the creditor of the secure of the property claims of the secure of the your district of the security claims of the property claims of the property claims of the creditor of the united states and your districts in Alabama and North Caroline Executive Office for United States Trustees (for all other districts). The continuous of the property of the proper	Are any debts that you listed in line 33 secured by your primary residence, a vehicle or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Identify property that secures the debt DNE- Solve you owe any priority claims - such as a priority tax, child support, or alimony - the greepast due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the eparate instructions for this form. This list may also be available at the bankruptcy clerk's office. Noverage monthly administrative expense Add all of the deductions for debt payment. Add lines 33e through 36. I Deductions from Income Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Copy line 37, All of the additional expense deductions Copy line 37, All of the deductions for debt payment **No.** Onco	Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Identify property that secures the debt Total cure to the creditor DNE- No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative of the United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the eparate instructions for this form. This list may also be available at the bankruptcy clerk's office. Add all of the deductions for debt payment. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS expense allowances Copy line 32, All of the additional expense deductions Copy line 37, All of the deductions for debt payment +\$ 0.00	Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Identify property that secures the debt Total cure amount No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Yes. Fill in the total amount of all past-due priority claims. Yes. Fill in the total amount of all past-due priority claims. Originated monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative office of the United States Courts (for districts in Alabama and North Carolina) or by he Executive Office for United States Trustees (for all other districts). Of ind a list of district multipliers that includes your district, go online using the link specified in the eparate instructions for this form. This list may also be available at the bankruptcy clerk's office. Add all of the deductions for debt payment. Add all of the allowed deductions. Copy line 32, All of the expenses allowed under IRS expense allowances Copy line 37, All of the additional expense deductions Copy line 37, All of the deductions for debt payment +\$ 0.00	Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Identify property that secures the debt Total cure amount Amount of the creditor Identify property that secures the debt Total cure amount Amount of the creditor such as a priority tax, child support, or alimony - that repeat due as of the filling date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative projected monthly Chapter 13 plan payment Current multiplier for your district sit is Alabama and North Carolina) or by the Executive Office of Unlied States Trustees (for all other districts). Add all of the deductions for debt payment. Add all of the allowed deductions. Copy line 33, All of the expenses allowed under IRS expense allowances Copy line 37, All of the additional expense deductions \$ 0.00 Copy line 37, All of the deductions for debt payment +\$ 0.00	Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i>). Next, divide by 60 and fill in the information below. Next, divide by 60 and fill in the information below. Identify property that secures the debt Total cure amount Monthly cure amount Addition of the creditor No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims. Yer projected monthly Chapter 13 plan payment Extrement multiplier for your district as stated on the list issued by the Administrative Office of the United States Course (for districts is Alabama and North Carolina) or by the Executive Office for United States Course (for districts is Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other district, online all so district multipliers that includes your district, on online using the link specified in the eparate instructions for this form. This list may also be available at the bankruptcy clerk's office. Add all of the deductions for debt payment. Add all of the additional expenses allowed under IRS suppose allowances Copy line 24, All of the additional expense deductions Copy line 37, All of the additional expense deductions Copy line 37, All of the deductions for debt payment **One of the control of the deductions for debt payment **One of the control of the deductions for debt payment **One of the control of the deductions for debt payment

ebtor 1	Margaret T. W	/atson		Case	numbe	er (if known)		
art 2:	Determine Yo	ur Disposable Income Under 11	U.S.C. § 1325(b)	(2)				
		rrent monthly income from line Current Monthly Income and Ca					\$	8,544.45
40. Fil ch dis	I in any reasonal ildren. The month ability payments to ceived in accordan	bly necessary income you receingly average of any child support particle and dependent child, reported in lance with applicable nonbankruptcy lended for such child.	ve for support fo ayments, foster ca Part I of Form 122	r dependent re payments, or C-1, that you	\$	C	0.00	
em in	ployer withheld fr	retirement deductions. The mont from wages as contributions for qual ()(7) plus all required repayments (0. § 362(b)(19).	alified retirement p	lans, as specified	\$_	C	0.00	
42. To	tal of all deduction	ons allowed under 11 U.S.C. § 7	07(b)(2)(A). Copy	line 38 here=>	\$	4,873	3.39	
ex the	penses and you heir expenses. You	cial circumstances. If special circular is a	scribe the special	circumstances and	I			
Descr	ibe the special c	ircumstances		Amount of exper	nse			
								
			Total \$	0.00	Cop	y => \$	0.00	
44. To	tal adjustments.	Add lines 40 through 43.		=> \$	i	4,873.39	Copy here=> -\$	4,873.39
	Ĭ	nthly disposable income under (§ 1325(b)(2). Subt	ract line 44 from lir	ne 39.		\$	3,671.06
art 3: 46. C h		or expenses. If the income in For	m 122C-1 or the 6	expenses you repo	rted ir	this form		
tim yo	ie your case will b u filed your petitio	e virtually certain to change after the open, fill in the information below n, check 122C-1 in the first column in when the increase occurred, and	w. For example, if n, enter line 2 in th	the wages reported ne second column,	d incr	eased after		
Form	Line	Reason for change		Date of change		Increase or decrease?	Amount of c	nange
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	C-2 C-1 C-2 C-2				_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Increase	\$ \$	
☐ 122						☐ Increase ☐ Decrease	\$	

Debtor 1	Margaret I. Watson	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the i	information on this statement and in any attachments is true and correct.
	/s/Manager T Wetson	
	/s/ Margaret T. Watson Margaret T. Watson	-
	Signature of Debtor 1	
Date	July 10, 2019	
	MM / DD / YYYY	

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Margaret T. Watson		Case No).	
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR I	DEBTOR(S)	
c	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(lompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptc	y, or agreed to be pa	id to me, for services	
	For legal services, I have agreed to accept		\$	7,500.00	
	Prior to the filing of this statement I have received		\$	2,500.00	
	Balance Due			5,000.00	
2. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed compe	ensation with any other perso	n unless they are me	embers and associates	of my law firm.
[☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				y law firm. A
5. I	n return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspe	cts of the bankruptc	y case, including:	
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour 	ment of affairs and plan which re and confirmation hearing, aduce to market value; ex his as needed; preparatio	ch may be required; and any adjourned h	earings thereof; g; preparation and	d filing of
6. B	by agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			nces, relief from st	ay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of any unkruptcy proceeding.	agreement or arrangement for	or payment to me fo	r representation of the	e debtor(s) in
Ju	ıly 10, 2019	/s/ Adam C. Gor	merman		
Do	nte	Adam C. Gomer			
		Signature of Attorn	<i>ıey</i> Adam C. Gomerm	an	
		807 East Jeriche	o Turnpike		
		Huntington Stat			
		631-549-1111 F agomerman@o _l	ax: 631-759-2925		
		Name of law firm	otomme.net		
		Traine of taw film			

United States Bankruptcy Court Eastern District of New York

In re	Margaret T. Watson		Case No.	
		Debtor(s)	Chapter	13

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

631-549-1111 Fax: 631-759-2925

USBC-44 Rev. 9/17/98

Selene Finance P.O. Box 422039 Houston, TX 77242-4239

Woods Oviatt Gilman, LLP 700 Crossings Bldg. 2 State Street Rochester, NY 14614

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

DEBTOR(S):	Margaret T. Watson	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure nowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the]
■ NO RELATED	CASE IS PENDING OR HAS E	BEEN PENDING AT ANY TIME.
☐ THE FOLLOW	NG RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (1	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATI	US OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (1	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	C/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Di	ischarged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to	NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "SCHEDULE "A" OF RELATED CASE:	A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals v be eligible to be debtors. Such an individual will be required	who have had prior cases dismissed within the preceding 180 days may not d to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATT	ORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Yor	k (Y/N): Y
I certify under penalty of perjury that the within bankruptcy as indicated elsewhere on this form. /s/ Adam C. Gomerman	case is not related to any case now pending or pending at any time, except
Adam C. Gomerman Signature of Debtor's Attorney Law Offices of Adam C. Gomerman 807 East Jericho Turnpike Huntington Station, NY 11746 631-549-1111 Fax:631-759-2925	Signature of Pro Se Debtor/Petitioner
	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

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